Application Data Sheet

Application Information

Secrecy Order in Parent Appl.?::

Application number::	
Filing Date::	November 8, 2001
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	Infusion System for Creating Microenvironments in
Attorney Docket Number::	a Living Body 11738,00038
Request for Early Publication?::	NO
Request for Non-Publication?::	NO
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity?::	NO
Latin name::	
Variety denomination name::	
Petition included?::	NO
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers:	

NO

Applicant Information

City of mailing address::

Applicant Authority Type:: Inventor Primary Citizenship Country:: USA Status:: **Full Capacity** Given Name:: Jerome Middle Name:: T. Family Name:: Hartlaub Name Suffix:: City of Residence:: **New Brighton** State or Province of Residence:: Minnesota Country of Residence:: **USA** Street of mailing address:: 2133 Erin Court City of mailing address:: **New Brighton** State or Province of mailing address:: Minnesota Country of mailing address:: **USA** Postal or Zip Code of mailing address:: 55112 Applicant Authority Type:: Inventor Primary Citizenship Country:: Status:: **Full Capacity** Given Name:: Middle Name:: Family Name:: Name Suffix:: City of Residence:: State or Province of Residence:: Country of Residence:: Street of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Status::

Full Capacity

Given Name::

Middle Name::

Family Name::

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number::

22908

Representative Information

Representative Customer Number::

22908

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/303,033	04/30/99

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Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::

Medtronic, Inc.

Street of mailing address::

7000 Central Avenue, NE

City of mailing address::

Minneapolis

State or Province of mailing address::

Minnesota

Country of mailing address::

USA

Postal or Zip Code of mailing address::

55432-3576